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An
Inaugural Essay
on
"Mania a Potu"
by
Richard Henry Thomas
of
Maryland

Passed. March 14th. 1826
W. R. H.

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The habitual abuse of Alcohol in its various dilutions is productive of many calamities and for a few short hours of enjoyment its misguided votaries pay a heavy penalty in disease: one not the most unusual effect of frequent intoxication is an interesting disorder which shall be the subject of the following essay.

This has been termed Mania a Potu, Mania a Temulentia, Delirium Tremens and the Brain fever of Drunkenness I have adopted the first as being sufficiently descriptive and most generally used In treating of this peculiar affection I shall offer a general history of the disease its symptoms, prognosis &c; I shall consider the treatment under two heads viz what is proper to be done first when old and confirmed sots and second when robust or occasional drunkards are the subjects of our care

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and lastly I shall give a brief sketch of the disease and treatment as presented to my view while a student in Maryland

History and Symptoms

Mania a Potu as its name implies is caused by drink, but a similar affection sometimes originates from the use of opium. an eminent practitioner relates a case which came under his own observation "a female who had long been in the habit of taking opium to a great extent was attacked with this disorder on suddenly lessening the doses of her favourite drug." Mania a Potu makes its appearance during that state of languor and depression which succeeds a debauch. If the accustomed stimulus should be withdrawn for any length of time, after a long course of hard drinking, the disease is exceedingly apt to be induced.

The precursory symptoms are lassitude,

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indistinct chills, debility, loathing of food, uneasiness in the head, anxious countenance and oppression at the epigastrium: these are succeeded by slight flushes and indications of excitement, the pulse is full though usually compressible, there is much irritability and watchfulness, tremors of the hands, the countenance is singularly altered, the eyes are wild and red, upper lip swelled and constantly in motion; the patient complains of severe head ach, the gastric disorder is distressing not even his favourite drink can be retained his skin is bathed in sweat which is increased by the slightest exercise: Confusion of mind supervenes, he loses his recollection, reason deserts her seat and many and various hallucinations torment the afflicted wretch. He imagines that persons are pursuing with intent to murder

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murder, and invokes heaven and earth to protect him; the dread of something about to fall on him is very frequent. If he has access to a window he will describe with so much earnestness and apparent truth what he thinks is passing without that the hearer can scarcely refrain examining whether it be reality or only the phantoms of a disturbed imagination. Sometimes he will be engaged in calculations at others in collecting money from the bed clothes. He will converse with one whom he fancies is present will listen for his answers and reply accordingly, if interrupted will either pay no attention or request silence. He will recognise his acquaintances and will even give a correct answer, but he immediately wanders again. In many instances tis impossible to convince him that he is at home he fancies that he is in durance vile and

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...ness of every effort to escape: but it would be endless to enumerate the many fantasies which occupy his mind; let it suffice that though timidity most attends his fits of madness, in some instances a contrary disposition is manifested, but even in these they imagine that sickness or some accident incapacitates them from committing the evil they meditate and threaten.

Fully convinced they are perfectly conscious of their opinions, but by soothing and judicious reasoning they may be brought to act as the wish: compulsion is equally unnecessary and worse than useless —

If not arrested, most of the above symptoms continue to increase; the pulse becomes small and extremely rapid, skin cold and clammy: then follows muttering delirium, or sudden short fits of phrensy followed by heaviness and insensibility; startings of the tendons,

frequently stretched out and very numerous hand; strabismus, general prostration of muscular power; difficulty of deglutition; convulsions and death. The duration of the disease is various; from, twelve days is usual, though we meet with cases which are much longer protracted. If convalescence be not established within the first four or five weeks there will be danger of long continued if not imminent derangement of mind for there is no doubt but that it sometimes terminates in confirmed mania

Prognosis

In mania a Potu occurring in young and robust subjects or even in old and confirmed cases where there is a ready susceptibility to the action of our remedies, the prognosis is usually favorable. Patients whom have been driven to the bottle to seek comfort

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from some great affliction are said to be in much danger: In inveterate drunkards who have previously laboured under any organic affection of the viscera the disease proves obstinate and often fatal. In the commencement of a long and undisturbed sleep can be procured the recovery will probably be rapid: So much is this insisted on that a respectable practitioner declares that he never witnessed a recovery where sleep could not be obtained and that a sound natural sleep has as invariably favourable: Continual watchfulness great irritation, weak rapid and thready pulse; indications of coma or convulsions and paroxysms of violence or struggling of short duration are among the most unfavourable symptoms the last are often the precursors of death

Pathology

[illegible] different views have been taken of the pathology of this disease. Post mortem examinations exhibit the stomach highly inflamed, the liver variously diseased, the brain sometimes in a healthy condition, at others congested or inflamed. The usual gastric distress and tenderness over the epigastrium; the pain in the head, nervous tremors, numbering mind and suffused eye; the dark unnatural colour of the stools and the discoloration attended to, would lead us to conclude that the disease consists of an inflammation of the stomach and which, may be considered a sequelae of the liver and brain: In Doctor Armstrong's words "The peculiarly irritable state of the nerves, induced by previous evils, the collapse of the system at the time of sickening, the various concessions

and the subsequent efforts of natural cy
stemic, we tend to produce and modify
the phenomena of this disease"

Treatment

Before commencing the treatment we should
endeavour to ascertain the constitution and
former habits of the patient: Does he indulge
freely in an occasional jovial or is he a set
inferred? If he is an old or inveterate to
tary of Bacchus, we must be cautious how
we deplete, even should the pulse seem to
indicate it; on a closer inspection though
all the pulse will be found very compressi
ble; the face is pale the skin cool and mus
cular debility very great. The most soothing
remedies are here requisite: Put the patient
to bed in a dark and quiet room, adminis
ter a dose of laudanum in some hot
toddy and let all our efforts tend to pro
mote sleep; when from any idiosyncrasy

opium becomes inadmissible it would be
advisable to substitute the spiders Web
or the tincture of Hop: the former has
been recommended in doses ten grains
at bed time, and the latter in ounce
doses also given at night. To allay irri-
tability of the stomach the effervescing
draught and neutral mixture are both
indicated. We sometimes encounter the
merely opposite state of the stomach by
insensibility even the largest doses of opium
and brandy make no impression; in this
emergency an active emetic of tartarized
antimony and ipecacuan is recommended
by freely evacuating the prima via, sus
ceptibility is awakened to the action of
our remedies, which may afterwards be
resorted to with benefit. To the inveterate
case of the stomach Doctor Chapman
thinks that emetics are peculiarly adapted

...t he does not approve of their general or
...ecessarily employment in mania a
...e. In the advanced stages in addition
the opium and hot toddy, camphor and
...onate of Ammonia are to be administered
...ers should be stimulating and generous,
...ies and spices, rich soups with cayenne
...pepper to far as I could ascertain during
my attendance there, the above is the plan
...ued in the Philadelphia Lunatic House.
...en the disease occurs in the young and
...ust or in those who have been long addicted
...to occasional intoxication the pulse
...sing and the determination to the
...ad accident. I would in the commencement
...ment but often be required, the bowels
...ould be very vacuated by calomel or
...d jalap or salts; after this has been
...eted, we may at night administer
...opium: in the morning ice and hot spray

and the cathartic medicines, Armstrong says "Even in habitual drunkards I am quite confident that it is always best in the beginning of the disease to open the bowels before the extinction of opening and to occasional drunkards this observation may be extended with increased force: since in them the purgatives must be employed not only at the onset but during the progress of the disease. In such persons I mean occasional drunkards it has been customary with me to use purgatives and tepid affusions in the day and calomel and opium in the night and this plan combined with a low diet has rarely failed of success." Yet even in occasional drunkards as a general rule purgatives should chiefly be confined to the early periods of the disease. Is an important remedy Doctor Armstrong say

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[illegible] recommends lateral affusions of salt and water followed by frictions. He observes "that if the water be well impregnated with salt, the skin properly rubbed and the opiate exhibited in a sufficient quantity to procure a tendency to sweat and sleep, most frequently succeeds; nay there will not only be a diminution of the nervous irritation, but likewise an improvement in the state both of the pulse and skin". To the use of calomel and opium our author seems strongly partial "the one to allay irritation the other to equalize the circulation". With the various strengthening effects of this combination we are all acquainted, but whether it ought to be administered in every instance to call to aid the powerful medicine is very problematical. "Lues intensis, mise dignus, tendice hodies Incident" –

the disease, prove, obstinate, & there seems to prove more, than an adequate cause of necessity, at the same time that we quiet nervous irritation by opiates, and support the system by the diffusible stimulants, and to nourishment. In the latter stages of the disease even under the most unpromising appearances calomel and opium will sometimes succeed and whence there is ground for doubting the propriety of vaccinations it should be administered in preference to any other expectorant. It is given according to the following formula. Take of these pills, calomel with a grain and a half of opium every six or eight hours pro re nata; This combination is also well adapted to those cases which are complicated with derangements of the liver and chylopoietic viscera; indicated by a heavily loaded tongue, foul gastric distrés and bilious discharges

In the early periods the Indian tribes were accustomed to use and which our cold affusions have been recommended. It is now well ascertained that they may be safely and successfully applied in Russia & Poland even when the skin is covered with perspiration and either of a cool or even warm heat, it will however generally be best to make use of frictions after them and to give a glass of wine either before or after an application. Special care must be taken attached at their onset to which hand they should be restricted, been received by these means alone. It is to be regretted that our practitioners (especially those in the country) are so indifferent with regard to cold & tepid ablutions: In all febrile affections it is totally unimportant to maintain the healthy functions of the skin and nothing conduces more to this end than affusions, they induce and equalize circulation and altogether

rendered the situation of the patient more comfortable. In conjunction with the lancet and leeches they are invaluable and in regard to them we deprive ourselves of a most powerful agent in arresting disease.

In concluding the treatment of this peculiar complaint I would urge that no unnecessary exertion be dispensed with. It but increases wakefulness and irritation. By medication and judicious indulgence — we may do much; an instance is related of the patient at his own request was permitted to take a walk abroad of a bleak morning, soon after returning he fell into a sound sleep and convalesced from that time.

In addition to what has been seen above I now invite with a brief sketch of the disease and method of treatment as practised by myself in Baltimore & Maryland

most of the cases occurred in young men in good
health: a suffused or inflamed eye, flushed face,
and full bounding pulse were remarkably
marked in conjunction with the premonitory
symptoms of Mania a Potu; a recent de-
bauch, in several cases, rendered the patient
almost unmanageable. Evacuations and the
knife were here borne and demanded here
very frequently when the case was unusually
protracted. Bailed at an early stage of the
disease it is the practice of Sampson* &
others here to bate from twelve to twenty
ounces of blood and I have seen him be
much pleased with evident advantage. The ver
effects of venesection are often immediately
made apparent, the furious agitation is repressed
and the patient from being boisterous and
unruly becomes quiet and tractable: after
taking a strong purgative purge, even
more action is promoted by Senna or Salts

* Dr. Gustavus Hue said

and there was no pain to be seen anywhere upon
both thighs: it was not either necessary to
give laxatives, but the bowels were
relieved by a mild enema. Under this treatment
she had a very comfortable night. The dress-
ing was left undisturbed until the third or fourth day. Pulty
was on the contrast to the side supposed to
have been the seat of the lesion, by which the motion of
the limb was not sufficiently removed, such
would. In the advanced stages of compliant
cases, patients will not bear the application
of the treatment so readily as in the
more recent cases.

I have been prompt to say a few words on
the same point. One case has followed by
a gunshot wound involved region — and dis-
ging lesions. This was relieved by dressing
the parts just before going to bed

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In conclusion I would remark, that it has not been my intention in this essay, in the slightest degree to institute a comparison between the two methods of treatment: Each is respectively applicable to so different states of the system that such an attempt would be absurd. I have witnessed many a Poter in the cells of the Philadelphia Alms house I have also seen several cases in the upper part of Anne Arundel county Maryland, their aspect and treatment were very dissimilar. We have the most abundant evidence of the narcotic plan of treatment being successful in the disease as it more usually appears. We have the authority of Armstrong and others for recommending a very different practice when this affection occurs in robust or occasional drunkards; and I am assured by my preceptor that in a long course of practice he has never had occasion to be dissatisfied

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with it. — We should therefore in this disorder as in others rigidly scrutinize the symptoms and circumstances of the case, and should prescribe accordingly. A discriminating practitioner may readily decide what course he should pursue, and whether he chooses opium or the lancet success will generally reward his efforts.